INITIATIVE 923

I, Sam Reed, Secretary of State of the State of Washington and custodian of its seal hereby certify that, according to the records on file in my office, the attached copy of Initiative Measure No. 923 to the People is a true and correct copy as it was received by this office.

- 1 AN ACT Relating to the creation of a universal health care system;
- 2 amending RCW 43.17.010 and 42.17.2401; reenacting and amending RCW
- 3 43.17.020; adding a new section to chapter 41.06 RCW; adding a new
- 4 chapter to Title 43 RCW; and prescribing penalties.

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- 5 BE IT ENACTED BY THE PEOPLE OF THE STATE OF WASHINGTON:
- 6 <u>NEW SECTION.</u> **Sec. 1.** The definitions in this section apply 7 throughout this chapter unless the context clearly requires otherwise.
 - (1) "Universal health care" means a publicly funded and administered single-payer system that provides and guarantees health coverage without premiums or deductibles to all citizens, and with no copays for low-income citizens.
 - (2) "Premium" means a periodic fee, typically monthly, that is paid in exchange for some type of insurance coverage.
 - (3) "Deductible" means a required out-of-pocket expenditure that must be paid by an insured individual before the insurer pays towards the allowable charges for a covered service.
- 17 (4) "Copay" means the amount an insured individual is expected to 18 pay for a medical expense at the time of the visit or purchase.
 - (5) "Department" means the department of universal health care.

- 1 (6) "Director" means the director of universal health care.
- 2 <u>NEW SECTION.</u> **Sec. 2.** Every legal resident of the state of
- 3 Washington is entitled to the basic human right of receiving necessary,
- 4 quality health care regardless of his or her financial status.
- 5 NEW SECTION. Sec. 3. A system of universal health care is hereby 6 established in the state of Washington. This system is designed to provide full access to health care for all legal residents of the state 7 of Washington. Financial status, including an inability to pay, shall 8 9 not be used as a means of denying access to this basic human right. 10 This applies to medical services as well as prescription drugs. 11 who is a legal resident of the state of Washington is eligible, 12 provided that the service or product is medically necessary for the 13 individual to remain healthy and reasonably free from pain and 14 suffering, both mental and physical, and provided that the service or product is being provided to the patient within the state of 15 16 Washington. All medical service providers in the state of Washington 17 are required to participate in universal health care billing for any 18 patient who requests it and they must keep an adequate number of 19 universal health care application forms on hand. A patient cannot be 20 denied service if a medical service provider fails to provide a 21 universal health care application in a timely fashion.
- NEW SECTION. Sec. 4. There is created a department of state government to be known as the department of universal health care. The department is vested with all powers and duties granted it under this chapter and such other powers and duties as may be authorized by law.
- NEW SECTION. Sec. 5. The system of universal health care shall be 26 27 managed by the department. The department is responsible for 28 processing and verifying all universal health care application forms, 29 sending payment to medical service providers and pharmacies for 30 services rendered, billing higher income patients for copays, 31 coordinating with medical service providers and other state agencies in 32 preventing and investigating fraudulent universal health care 33 applications, and any other tasks related to the administration of the 34 universal health care system.

NEW SECTION. Sec. 6. The department is responsible for collecting copays from patients as a percentage of the total medical costs being billed. This percentage is based on the patient's income, adjusted for inflation, as follows: No copay for anyone making less than sixty thousand dollars per year, twenty-five percent copay for anyone making sixty thousand dollars to seventy-five thousand dollars per year, fifty percent copay for anyone making seventy-five thousand one dollars to one hundred thousand dollars per year, and seventy-five percent copay for anyone making more than one hundred thousand dollars per year. patient may either choose to pay the amount at the time of visit or opt to have the department send him or her a bill for the copay amount to the patient's billing address. If paid upfront to the medical service provider, such as a doctor's office, hospital, or pharmacy, the medical service provider is responsible for collecting that fee and sending payment for the same amount to the department along with the patient's universal health care application form. If the patient decides to be billed for the copay, then she or he must specify that on the form, accompanied by a separate signature, in order to prevent potential copay collection fraud on the part of the medical service provider. If the patient is under eighteen years of age, no copays apply regardless of income. Patients who habitually fail to pay their copays may be sued by the state if the amount of past-due funds is equal to or greater than five thousand dollars, if the amount has been past-due for more than two years, if the patient has not made good-faith payments or adhered to payment arrangements made with the state, and if the patient has not demonstrated any extenuating circumstances preventing the patient from making adequate payments.

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NEW SECTION. Sec. 7. All products and services that are medically necessary as determined by doctors and nurses in the medical community are covered by universal health care. These include, but are not necessarily limited to: Rehabilitative, long-term, and home care, prenatal care, mental health care, prescription drugs, over-the-counter medications that are prescribed by a doctor and purchased at a pharmacy within the state of Washington, medical supplies, drug and alcohol treatment, necessary surgery, ambulance transport, preventive care, and public health measures. The department is responsible for determining whether or not a product or service is deemed medically necessary by the medical community at large. In the event of conflict or

1 uncertainty as to whether or not a product or service is deemed 2 medically necessary by the medical community at large resulting in 3 disagreement between the patient, medical service provider, and the department, regarding whether or not the medical product or service 4 5 should be covered by universal health care, a judge in the county of jurisdiction shall make that determination. Either party may appeal 6 7 the decision within thirty days of the decision to the superior court 8 of Thurston county by petition setting forth the medical product or 9 service, any statements from doctors or nurses involved, and the nature of and grounds for the objection or objections to the judge's ruling. 10 11 In the event that a medical product or service has been provided prior 12 to eligibility being denied, the medical service provider is still 13 guaranteed full payment from the department, provided that the 14 ineligibility is not due to any billing errors, unintentional or 15 deliberate, on the part of the medical service provider. In the event 16 that a medical service provider is paid for a service that a patient does not qualify to be covered for, the patient shall be responsible 17 18 for repaying the department one hundred percent of the amount billed, 19 plus twenty-five percent annual interest if the patient is determined 20 to be at fault for the error. If fraud is suspected on the part of the 21 patient or the medical service provider resulting in denial of 22 eligibility, the matter shall be fully investigated and potentially 23 forwarded to the attorney general's office for prosecution.

NEW SECTION. Sec. 8. The following medical products and services are among those not covered by universal health care: Elective surgery, herbal supplements, drugs not approved by the federal food and drug administration, care that is primarily religious or spiritual in nature, and any other product or service that is not medically necessary.

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NEW SECTION. Sec. 9. Patients who opt to bill the universal health care system must provide the following information on a single form: Full legal name, mailing address, or if patient is homeless "no address", billing address, state driver's license number or social security number, estimated annual income, date of birth, phone number if patient has one, name of employer, occupation, patient's signature, and type of medical service, such as cardiac, dental, ocular, or prescription drugs from a pharmacy, or procedure, such as surgery, CT

1 scan, X-ray, blood test, or examination, being sought. On the same 2 form, the medical service provider must clearly identify itself, the 3 name of the individual filling out that part of the form on behalf of the medical service provider along with a signature from that 4 5 individual, and any applicable details relating to the patient's visit. When the patient returns the completed form to the medical service 6 7 provider, she or he is required to provide photo identification with 8 The medical service provider is then responsible for copying or digitally scanning the photo identification and including the copy with 9 the form. If the patient does not have valid photo identification, the 10 11 medical service provider must take a clearly identifiable color photo 12 of the patient and include that with the form in place of photo 13 identification. This is designed to assist the department in deterring 14 and investigating fraudulent applications. The medical service 15 provider is responsible for providing this signed and completed form to 16 the department within thirty days of the visit. If the application is missing any required information, including photo and signature, 17 18 payment to the medical service provider shall be denied. If the form 19 is not filled out completely or correctly by the patient in a manner 20 that could result in denial of payment from the department, the medical 21 service provider is not obligated to accept the application and may 22 require the patient to fill it out correctly before being granted 23 service, unless it is a medical emergency. In the event of a medical 24 emergency, the application may be filled out later by the patient or by 25 someone legally acting on behalf of the patient at the earliest 26 reasonable time. All universal health care applications must be 27 randomly verified in a timely manner by the department. This 28 verification process must be completed without requesting additional 29 documentation from the medical service provider or the patient unless 30 there is a suspicious discrepancy that needs to be investigated in more 31 detail. In addition, all first-time applications must undergo this 32 verification process to ensure that correct information is being 33 provided, such as name and income. Once verification is complete, the 34 department must send to the patient via United States mail a universal 35 health card. This card must contain the following patient information: 36 Photo, full legal name, required copay percentage based on income, card 37 expiration date of one year from the date that the universal health 38 care application was filled out by the patient, billing address, phone 39 number, a unique universal health care patient identification number,

1 and date of birth. In order to reduce the number of copay errors, the 2 background on each universal health card must be color-coded based on 3 the patient's income-determined copay percentage as follows: Green for no copay, blue for twenty-five percent copay, yellow for fifty percent 4 5 copay, and white for seventy-five percent copay. This required color 6 coding may not be construed as an acceptable substitute for the card 7 also stating the copay percentage in print form. The patient is 8 required to sign the back of this card for it to be considered valid. 9 This card may be supplied to any medical service provider for any medically necessary products, services, and prescription drugs in place 10 11 of a universal health care application. The medical service provider 12 is then responsible for filling out a separate universal health care 13 card billing form with the information on the universal health card. 14 If a patient notices an error on his or her universal health card, or 15 if the card is lost or stolen, then she or he is responsible for 16 contacting the department as soon as possible to request a replacement 17 There is no limit to the amount of medically necessary coverage 18 a patient may have billed to the department. If a patient fills a 19 prescription to be billed to universal health care with generic 20 substitution allowed by the patient's doctor, the pharmacy is required 21 to fill that prescription with the least expensive equivalent generic 22 available in order to minimize the cost to the taxpayers. If a generic 23 substitution is not authorized by the patient's doctor on the 24 prescription, the pharmacy must include, with the universal health care 25 billing request, universal health care application, or universal health 26 care card billing form, the brand name and price of the least expensive 27 available generic equivalent stocked by the pharmacy. The department 28 shall bill the company that produces the more expensive brand name drug 29 that was filled for the difference between the cost of the more 30 expensive drug and the least expensive available generic on hand. 31 department may sue the drug company if this bill is not paid in full 32 within one year.

NEW SECTION. Sec. 10. Medical products and services not already paid for during the period of January 1, 2004, to January 1, 2007, may be billed to the department by a patient filling out a special universal health care grandfather clause form prior to January 1, 2008. This form must contain all the same information as the standard universal health care application form, including information from the

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1 medical service provider. All medical service providers in the state 2 of Washington are responsible for supplying this form and forwarding it 3 to the department until January 1, 2008. All universal health care grandfather clause forms must be verified by the department. If a 4 5 medical expense has already been partially paid, the department shall pay only the remaining balance. If a medical expense has been 6 7 forwarded to a collection agency, the department shall assume the debt 8 upon verification of the application form including information from 9 the medical service provider and the collection agency. collection agency fails to provide information necessary to 10 11 verification in a timely fashion, the department shall make payment 12 directly to the medical service provider and the patient will no longer 13 be liable for any debt relating to this expense.

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NEW SECTION. Sec. 11. The department is responsible for coordinating with other state agencies in investigating universal health care application fraud, including but not limited to: Providing a false name, social security number, or state identification number; submitting a universal health care application by a patient who is not a legal resident of the state of Washington; deliberately providing false information on a universal health care application, including income; reselling medical products or services paid for by universal health care by a patient; deliberately billing the department for products or services not provided to the patient or for monetary amounts exceeding the universal health care price structure as outlined in this chapter; and attempting to use the name of a legal resident of the state of Washington in order to obtain universal health carecovered medical products or services to someone who is not a legal resident of the state of Washington. Universal health care fraud by an individual or medical service provider is a felony punishable by up to three years in prison and up to a two hundred fifty thousand dollar fine.

NEW SECTION. Sec. 12. When billing the department, the medical service provider must adhere to a specific price structure for any service provided to the patient. This price schedule shall be equivalent to that developed by the state department of social and health services. If the department of social and health services does not have a set price for a particular product or service, the price

shall be set to whatever the federal medicare program specifies. medical service provider in the state of Washington may optionally bill the department for services covered by a patient's private insurance The department is then responsible for billing the private company. insurance company. If coverage is denied by the private insurer, the department shall pay fifty percent of the billed amount to the medical service provider. If the insurer does pay, the department shall pay ninety-five percent of that payment to the medical service provider. Medical service providers may bill private insurers directly if they prefer, but will not be eligible for any quaranteed payment if they do and the private insurer decides to deny coverage.

NEW SECTION. Sec. 13. The state legislature is solely responsible for providing adequate funding to the department. In the event that the department's budget is insufficient to provide the full range of services outlined in this chapter to every single legal resident of the state of Washington who requests them, the department can and must use money from the state general fund once their department funds have been exhausted, then provide a detailed public report explaining why they were unable to operate within their specified budget.

NEW SECTION. Sec. 14. The executive head and appointing authority of the department is the director. The director shall be appointed by the governor, with the consent of the senate, and shall serve at the pleasure of the governor. The director shall be paid a salary to be fixed by the governor in accordance with RCW 43.03.040. If a vacancy occurs in the position while the senate is not in session, the governor shall make a temporary appointment until the next meeting of the senate.

Sec. 15. It is the intent of the legislature NEW SECTION. wherever possible to place the internal affairs of the department under the control of the director in order that the director may institute therein the flexible, alert, and intelligent management of its business that changing contemporary circumstances require. Therefore, whenever the director's authority is not specifically limited by law, the director has complete charge and supervisory powers over the department. The director may create such administrative structures as the director considers appropriate, except as otherwise specified by

- 1 law. The director may employ such assistants and personnel as
- 2 necessary for the general administration of the department. This
- 3 employment shall be in accordance with the state civil service law,
- 4 chapter 41.06 RCW, except as otherwise provided.
- 5 NEW SECTION. Sec. 16. Except as otherwise specified or as federal requirements may differently require, divisions may be established and 6 7 organized in accordance with plans to be prepared by the director and approved by the governor. In preparing such plans, the director shall 8 9 endeavor to promote efficient public management, to improve programs, and to take full advantage of the economies, both fiscal and 10 11 administrative, to be gained from the consolidation of functions and 12 agencies under this chapter.
- 13 NEW SECTION. Sec. 17. The director shall appoint a deputy 14 director, a department personnel director, and such assistant directors as may be needed to administer the department. The deputy director 15 16 shall have charge and general supervision of the department in the 17 absence or disability of the director and, in case of a vacancy in the 18 office of director, shall continue in charge of the department until a 19 successor is appointed and qualified, or until the governor appoints an 20 acting director.
- NEW SECTION. Sec. 18. Any power or duty vested in or transferred to the director by law or executive order may be delegated by the director to the deputy director or to any other assistant or subordinate; but the director shall be responsible for the official acts of the officers and employees of the department.
- NEW SECTION. Sec. 19. The director may appoint such advisory 26 27 committees or councils as may be required by any federal legislation as 28 a condition to the receipt of federal funds by the department. 29 director may also appoint statewide committees or councils on such 30 matters within the department's subject as are or come 31 The statewide committees and councils shall have responsibilities. 32 representation from all major political parties and shall have substantial consumer representation. The committees or councils shall 33 be constituted as required by federal law or as the director may 34 35 determine. The members of the committees or councils shall hold office

as follows: One-third to serve one year; one-third to serve two years; and one-third to serve three years. Upon expiration of the original terms, subsequent appointments shall be for three years except in the case of a vacancy, in which event appointment shall be only for the remainder of the unexpired term for which the vacancy occurs. No member may serve more than two consecutive terms.

Members of such state advisory committees or councils may be paid their travel expenses in accordance with RCW 43.03.050 and 43.03.060.

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9 NEW SECTION. Sec. 20. In furtherance of the policy of the state 10 to cooperate with the federal government in all of the programs under 11 the jurisdiction of the department, such rules as may become necessary 12 to entitle the state to participate in federal funds may be adopted, 13 unless expressly prohibited by law. Any internal reorganization 14 carried out under the terms of this chapter shall meet federal 15 requirements that are a necessary condition to state receipt of federal 16 Any section or provision of law dealing with the department 17 that may be susceptible to more than one construction shall be 18 interpreted in favor of the construction most likely to comply with 19 federal laws entitling this state to receive federal funds for the 20 various programs of the department. If any law dealing with the 21 department is ruled to be in conflict with federal requirements that 22 are a prescribed condition of the allocation of federal funds to the 23 state, or to any departments or agencies thereof, the conflicting part 24 is declared to be inoperative solely to the extent of the conflict.

NEW SECTION. Sec. 21. A new section is added to chapter 41.06 RCW to read as follows:

In addition to the exemptions under RCW 41.06.070, the provisions of this chapter shall not apply in the universal health care to the director, the director's personal secretary, the deputy director, all division directors and assistant directors, and one confidential secretary for each of these officers.

Sec. 22. RCW 43.17.010 and 2005 c 333 s 10 are each amended to read as follows:

There shall be departments of the state government which shall be known as (1) the department of social and health services, (2) the department of ecology, (3) the department of labor and industries, (4)

- 1 the department of agriculture, (5) the department of fish and wildlife,
- 2 (6) the department of transportation, (7) the department of licensing,
- 3 (8) the department of general administration, (9) the department of
- 4 community, trade, and economic development, (10) the department of
- 5 veterans affairs, (11) the department of revenue, (12) the department
- of retirement systems, (13) the department of corrections, (14) the
- 7 department of health, (15) the department of financial institutions,
- 8 ((and)) (16) the department of archaeology and historic preservation,
- 9 which shall be charged with the execution, enforcement, and
- 10 administration of such laws, and invested with such powers and required
- 11 to perform such duties, as the legislature may provide, and (17) the
- 12 <u>department of universal health care</u>.
- 13 **Sec. 23.** RCW 43.17.020 and 2005 c 333 s 11 and 2005 c 319 s 2 are each reenacted and amended to read as follows:
- 15 There shall be a chief executive officer of each department to be
- 16 known as: (1) The secretary of social and health services, (2) the
- 17 director of ecology, (3) the director of labor and industries, (4) the
- 18 director of agriculture, (5) the director of fish and wildlife, (6) the
- 19 secretary of transportation, (7) the director of licensing, (8) the
- 20 director of general administration, (9) the director of community,
- 21 trade, and economic development, (10) the director of veterans affairs,
- 22 (11) the director of revenue, (12) the director of retirement systems,
- 23 (13) the secretary of corrections, (14) the secretary of health, (15)
- 24 the director of financial institutions, ((and)) (16) the director of
- 25 the department of archaeology and historic preservation, and (17) the
- 26 <u>director of universal health care</u>.
- 27 Such officers, except the director of fish and wildlife, shall be
- 28 appointed by the governor, with the consent of the senate, and hold
- 29 office at the pleasure of the governor. The director of fish and
- 30 wildlife shall be appointed by the fish and wildlife commission as
- 31 prescribed by RCW 77.04.055.
- 32 **Sec. 24.** RCW 42.17.2401 and 2005 c 424 s 17 are each amended to
- 33 read as follows:
- For the purposes of RCW 42.17.240, the term "executive state
- 35 officer" includes:
- 36 (1) The chief administrative law judge, the director of
- 37 agriculture, the administrator of the Washington basic health plan, the

1 director of the department of services for the blind, the director of 2 the state system of community and technical colleges, the director of 3 community, trade, and economic development, the secretary of 4 corrections, the director of ecology, the commissioner of employment 5 security, the chair of the energy facility site evaluation council, the secretary of the state finance committee, the director of financial 6 7 management, the director of fish and wildlife, the executive secretary 8 of the forest practices appeals board, the director of the gambling 9 commission, the director of general administration, the secretary of health, the administrator of the Washington state health care 10 11 authority, the executive secretary of the health care facilities authority, the executive secretary of the higher education facilities 12 authority, the executive secretary of the horse racing commission, the 13 14 executive secretary of the human rights commission, the executive 15 secretary of the indeterminate sentence review board, the director of 16 the department of information services, the director of the interagency committee for outdoor recreation, the executive director of the state 17 18 investment board, the director of labor and industries, the director of 19 licensing, the director of the lottery commission, the director of the 20 office of minority and women's business enterprises, the director of 21 parks and recreation, the director of personnel, the executive director 22 of the public disclosure commission, the director of retirement 23 systems, the director of revenue, the secretary of social and health 24 services, the chief of the Washington state patrol, the executive 25 secretary of the board of tax appeals, the secretary of transportation, 26 the secretary of the utilities and transportation commission, the 27 director of veterans affairs, the president of each of the regional and 28 state universities and the president of The Evergreen State College, 29 each district and each campus president of each state community college, the director of universal health care; 30

- (2) Each professional staff member of the office of the governor;
- (3) Each professional staff member of the legislature; and

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(4) Central Washington University board of trustees, board of trustees of each community college, each member of the state board for community and technical colleges, state convention and trade center board of directors, committee for deferred compensation, Eastern Washington University board of trustees, Washington economic development finance authority, The Evergreen State College board of trustees, executive ethics board, forest practices appeals board,

- forest practices board, gambling commission, life sciences discovery 1 2 fund authority board of trustees, Washington health care facilities 3 authority, each member of the Washington health services commission, higher education coordinating board, higher education facilities 4 5 authority, horse racing commission, state housing finance commission, human rights commission, indeterminate sentence review board, board of 6 7 industrial insurance appeals, information services board, interagency 8 committee for outdoor recreation, state investment board, commission on 9 judicial conduct, legislative ethics board, liquor control board, lottery commission, marine oversight board, Pacific Northwest electric 10 11 power and conservation planning council, parks and recreation 12 commission, personnel appeals board, board of pilotage commissioners, 13 pollution control hearings board, public disclosure commission, public 14 pension commission, shorelines hearing board, public employees' 15 benefits board, salmon recovery funding board, board of tax appeals, 16 transportation commission, University of Washington board of regents, utilities and transportation commission, Washington state maritime 17 18 commission, Washington personnel resources board, Washington public 19 power supply system executive board, Washington State University board 20 of regents, Western Washington University board of trustees, and fish 21 and wildlife commission.
- NEW SECTION. Sec. 25. Sections 1 through 20 of this act constitute a new chapter in Title 43 RCW.

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